



Prescription Drug Core Group Meeting
March 27, 2018
1:00 p.m.
Industrial Commission of Arizona – Hearing Room A
 800 West Washington Street, Phoenix, AZ 85007

A general meeting of the Prescription Drug Core Group convened on May 29, 2018 at the Industrial Commission of Arizona, Hearing Room A, 800 West Washington Street, Phoenix, AZ 85007.

Members Present (9)	
Sheila Sjolander , Chairman, Arizona Department of Health Services	
Alexa Ballesteros , High Intensity Drug Trafficking Area	
Monique Bullock , Arizona Air National Guard (AZNG) (representing Courtney Whitley)	
Catie Clark , Arizona Criminal Justice Commission (via phone)	
Tracy Cruickshank , Maricopa County Department of Public Health	
Ted Huntington , ICAN: Positive Programs for Youth, and CCYSA: Chandler Coalition Against Youth	
Jacqueline Kurth , Industrial Commission of Arizona	
Daniel Greenleaf , AHCCCS (representing Michelle Skurka)	
Travis Williams , Arizona Attorney General's Office	
Staff/Guests Present (11)	Members Absent (6)
Heidi Christensen , Center for Faith-based and Neighborhood Partnerships, U.S. Department of Health and Human Services (via phone)	Heather Brown , Mercy Maricopa Integrated Care
Monty Burks , Tennessee's Department of Mental Health and Substance Abuse Services, Faith-based Recovery Network (via phone)	Thomas Kelly , Apache Junction Police Department
Pastor Greg Delaney , Faith Partners for Ohio Attorney General Mike DeWine's Statewide Outreach on Substance Use (via phone)	Brett Klein , High Intensity Drug Trafficking Area
Drew Brooks , Executive Director of Faith Partners (via phone)	Tomi St. Mars , Arizona Department of Health Services
Samuel Burba , Governor's Office of Youth, Faith and Family (via phone)	Alyssa Padilla , University of Arizona Center for Rural Health
Dawna Allington , Governor's Office of Youth, Faith and Family	Lauren Prole , Arizona Health Care Cost Containment System (AHCCCS)
Adrian Gariboldi , Governor's Office of Youth, Faith and Family	
Fred Taylor , Arizona Attorney General's Office	
Hal Sacks , Bridge Builders	
Liz Beck , Faith Leader	
Jolyann Begay-Kroyua , Community Member	

Call to Order

- **Sheila Sjolander, Chairman**, called the Prescription Drug Core Group meeting to order at 1:02 pm with nine (9) members and eleven (11) staff and guests present.

Welcome/Introductions

- **Sheila Sjolander, Chairman**, welcomed everyone and asked them to introduce themselves.

Approval of Minutes

- Minutes for the meeting held March 27, 2018, were reviewed. **Catie Clark** made a motion to approve the minutes. The motion was seconded by **Jacqueline Kurth**.

Engaging the Faith Community on Drug Abuse Response

- **Samuel Burba** began by stating that the Center for Faith-based and Neighborhood Partnerships (CFBNP) at the U.S. Department of Health and Human Services (DHHS) had brought three speakers from across the country to address the Rx Core Group on engaging the faith community on drug abuse response.
- **Heidi Christensen** introduced the Center for Faith-based and Neighborhood Partnerships (CFBNP). She stated that the Center's mission is to strengthen the capacity of faith and community leaders to respond to substance abuse and addiction in their communities. She stated that she believes people of faith are a particular asset in fighting substance abuse in communities across the country. Ms. Christensen also urged faith and community leaders to utilize the Toolkit designed for engaging faith-based communities, a resource provided on the Center's website. Ms. Christensen then introduced the speakers and thanked each of them for setting aside time to participate.
- **Monty Burks** presented on the Tennessee Community Faith Based Initiative. The initiative was designed to connect faith-based communities with prevention coalitions, recovery courts, treatment programs, jail and prison programs, recovery programs and lifeline peers around Tennessee to increase access to resources for faith-based communities and those struggling with substance abuse. Mr. Burks argued that Tennessee provided the perfect location to launch such an initiative because of the 11,542 Faith Based congregations/organizations in the state and the large number of individuals struggling with and dying from problems associated with substance abuse. The initiative is modeled on a continuum of care ranging from promotion and prevention to treatment and recovery. One component of the initiative is the Lifeline Peer Project, which works to reduce stigma related to addiction and increase community support for policies that provide for treatment and recovery services. Project approaches include the establishment of evidence-based addiction and recovery programs, educational presentations for civic groups, faith based organizations, and community leaders to increase understanding of the disease of addiction support for recovery strategies, and the facilitation of access to treatment and recovery support amongst diverse communities. Outcomes of the project thus far include the certification of 300 recovery congregations (with 54 more organizations currently working to be certified) and establishment of 87 education forums in 81 counties across Tennessee.
- **Pastor Greg Delaney** provided an overview of methods to empower and build faith-based capacity in a given community. Pastor Delaney argued that the mission of any such initiative must be to educate, enlighten, equip and engage faith leaders so they may make an impact inside and outside their congregations. Pastor Delaney stated that often congregations must be taught to research about service providers in their area and to collaborate with those providers – he stated that the biggest obstacle for some faith-based communities is a lack of information about providers in their area. Pastor Delaney emphasized the web of individuals and organizations that must collaborate and be connected in order for individuals struggling with addiction to get the requisite services and support. He stated that congregations must work with a solid vision, mission and method in order to achieve change in their communities. Lastly, Pastor Delaney elaborated on several different approaches that faith-based communities can pursue in order to make a lasting difference in fight addiction in their communities. These approaches included processes to discover how a faith-based community can make a tangible and sustainable impact, community engagement strategies, the establishment of recovery programs, and other wraparound services that can be deployed.
- **Drew Brooks** gave a summary of different methods congregations can utilize to fight substance abuse in their communities by describing methods that his organization, Faith Partners, have applied to combat substance abuse in St. Paul, Minnesota. Mr. Brooks began by emphasizing that clergy and congregations across the country recognize that substance abuse is a large problem in their communities. In response, Mr. Brooks argues that faith-based organizations can and should adopt science-based approaches to fighting addiction, thereby gaining the best attributes of both science-based and faith-based programs. Mr. Brooks'

organization utilizes the Faith Partners Model, which includes a readiness phase, a development phase, and a sustainability phase. During the readiness phase, a congregation focuses on how best to mobilize the resources at its disposal and designs strategies to target the problem. The development phase then involves resource identification, trainings, technical assistance, and the building of educational materials. Finally, the sustainability phase involves planning, evaluation, networking, and on-going education. The scope of work done by a faith-based community can include prevention, early intervention, referral assistance, recovery support, and advocacy. Mr. Brooks believes that with a well-designed approach in combination with congregational support, campaigns initiated by faith-based communities can make tangible differences in the lives of individuals and communities affected by substance abuse.

- **Samuel Burba** asked how best a state can reach a particular faith community or church “where they are” in relation to substance abuse problems in their communities. **Drew Brooks** responded that states should be available to help faith-based communities understand the priorities of the state, what that specific community’s priorities are, and how those priorities can align to help those in need. **Monty Burks** emphasized the need for congregations to appoint champions to lead in this work on the ground. This in turn will help in the generation of a state-based recovery coalition of faith-based communities.
- **Samuel Burba** asked how exactly the faith-based Toolkit provided by the Center for Faith-based and Neighborhood Partnerships can best be implemented. **Heidi Christensen** stated that the Toolkit is most effective when there is community wide awareness of the issues surrounding substance abuse, educational opportunities for community members, and the capacity within the community to best address such issues. Ms. Christensen stated that the Toolkit can be utilized to further these ends, but a solid foundation of such traits is also extremely helpful.
- **Jacqueline Kurth** commented that the Rx Core group should work alongside other commission’s to implement the Toolkit in faith-based communities across the state.
- **Hal Sacks** asked if engaging with faith-based communities is a part of the state strategic plan targeting substance abuse. **Sheila Sjolander** responded that engaging the faith-based communities is not currently a part of the five major strategies outlined by the Rx Core Group, but contended that the Rx Core Group could utilize current resources in pursuit of such a goal. **Ted Huntington** argued that a specific subcommittee directed towards engaging faith-based communities on issues related to substance abuse should be established since it can be very difficult to generate viable strategies to recruit and engage faith-based communities on a statewide level. **Ms. Kurth** stated that pre-existing surveys could be passed on to faith leaders so they may assess readiness to tackle these issues in their own communities. **Mr. Burba** stated that it is important to ensure that the Rx Core group is not duplicating efforts in this regard with other state agencies. **Fred Taylor** emphasized how widespread the opioid abuse problem is and how faith-based communities can and should be utilized to target this problem.

Update on CSPMP Training for Law Enforcement

- **Travis Williams** described the Arizona Attorney General’s Office’s efforts in training law enforcement on how to use the Controlled Substance Prescription Monitoring Program (CSPMP). The Attorney General’s Office is responsible for investigating and prosecuting over-prescribers that utilize Medicaid funding. He stated that a large portion of his work involves training law enforcement officers on how to use the CSPMP to stop pill mills and over-prescribers in their communities. Mr. Williams asserted that the CSPMP can be a very powerful tool in tracking scripts and finding problems at their source. He argued that the CSPMP is still under-utilized by law enforcement agencies. He also stated that Arizona has largely followed in the footsteps of Florida in how the state investigates and prosecutes these cases. Still, Mr. Williams maintained that these cases are very difficult to investigate and prove. Therefore, Mr. Williams believes that it is very important for law enforcement agencies to be properly trained on how to correctly investigate these cases using the CSPMP. Mr. Williams also asserted that increased capacity to investigate these cases at the Attorney General’s Office has allowed for more investigations and prosecutions.

- **Jacqueline Kurth** asked if the Attorney General's Office is responsible for investigating drug manufacturers in relation to incidences of overprescribing. Mr. Williams stated that such investigations are primarily the job of the Drug Enforcement Agency (DEA).

Update on Rx Toolkit Training

- **Dawna Allington** stated that she is conducting Rx Toolkit trainings across Arizona and is tailoring the trainings to fit the specific needs of each community. Ms. Allington also said that she would be developing and hosting a series of webinars to educate community members and leaders on Rx abuse. She requested that members of the Rx Core Group reach out to her if they wished to collaborate with these webinars. Ms. Allington also stated that she is seeking the contact information of organizations that have successfully implemented the Rx Toolkit in their communities that would be willing to provide guidance and assistance for other organizations currently implementing the Toolkit. Ms. Allington stated that she hopes the Rx Core Group can help her in establishing a web of support across Arizona that organizations can utilize.

Agency/Partner Updates

- **Daniel Greenleaf** stated that AHCCCS is partnering with LeCroy & Milligan Associates, Inc. to conduct a statewide needs assessment. AHCCCS is also researching how the faith community can be involved in these efforts. Mr. Greenleaf stated this assessment would be completed on the fall of 2018.
- **Alexa Ballesteros** stated that Arizona HIDTA's threat assessment would be released within the next three weeks. She also said that the opioid monitoring initiative to track drug seizures is being made available for private and public usage.
- **Sheila Sjolander** stated that the new Arizona Opioid Prescribing Guidelines from ADHS have been updated and are publicly available. She also said that the Opioid Assistance and Referral line is now fully operational.

Recognition of Service and Leadership

- **Samuel Burba** thanked **Sheila Sjolander** for her years of service to the Rx Core Group and provided her with a certificate of appreciation from the leaders of the Arizona Substance Abuse Partnership (ASAP).

Introduction of New Co-Chairs

- **Sheila Sjolander** introduced **Jacqueline Kurth** and **Tracy Cruickshank** as the new Co-Chairs of the Rx Core Group.

Future Meeting Dates

- The next meeting is scheduled for:
 - July 31st, 2018 at 1:00pm

Future Agenda Items

- **Sheila Sjolander** asked for the Rx Core Group to review targets from the state strategic initiative on opioid abuse at the next meeting.
- **Dawna Allington** requested a discussion about further updates of the Rx Toolkit at the next meeting.

Adjourn

- **Sheila Sjolander, Chairman**, called for a motion to adjourn.
- **Jacqueline Kurth** moved to adjourn the meeting at 3:05 pm. Motion was seconded by **Tracy Cruickshank**. Meeting was adjourned at 3:05 pm.